

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective October 1, 2003

Application or Docket Number  
107644859

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

| TOTAL CLAIMS                     |  |              |                          |
|----------------------------------|--|--------------|--------------------------|
| FOR                              |  | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          |  | minus 20 =   | *                        |
| INDEPENDENT CLAIMS               |  | minus 3 =    | *                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |  |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

*8-21-03* **CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | OTHER THAN<br>SMALL ENTITY |                        |
|--|---|-------|---|------------------|----------------------------|------------------------|
|  |   |       |   |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |
| Total  | * 62                                      | Minus | ** 62                                       | = 0              | XS 9=                      |                        |
| Independent                                    | * 9                                       | Minus | *** 9                                       | = 0              | X43=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       | <input type="checkbox"/>                    | +145=            |                            |                        |

| SMALL ENTITY<br>TYPE | OTHER THAN<br>OR SMALL ENTITY |                     |
|----------------------|-------------------------------|---------------------|
|                      | RATE                          | FEES                |
| BASIC FEE            | 385.00                        | OR BASIC FEE 770.00 |
| XS 9=                |                               | OR XS18=            |
| X43=                 |                               | OR X86=             |
| +145=                |                               | OR +290=            |
| TOTAL                |                               | OR TOTAL 113.094.00 |

| SMALL ENTITY     | OTHER THAN<br>OR SMALL ENTITY |                        |
|------------------|-------------------------------|------------------------|
|                  | RATE                          | ADDI-<br>TIONAL<br>FEE |
| RATE             | ADDI-<br>TIONAL<br>FEE        |                        |
| XS 9=            |                               | OR X\$18=              |
| X43=             |                               | OR X86=                |
| +145=            |                               | OR +290=               |
| TOTAL ADDIT. FEE |                               | OR TOTAL ADDIT. FEE    |

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | OTHER THAN<br>SMALL ENTITY |                        |
|--|---|-------|---|------------------|----------------------------|------------------------|
|  |   |       |   |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |
| Total  | * Minus                                   | Minus | **  | =                | XS 9=                      |                        |
| Independent                                    | * Minus                                   | Minus | ***   | =                | X43=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       | <input type="checkbox"/>                    | +145=            |                            |                        |

| RATE             | OTHER THAN<br>OR SMALL ENTITY |                        |
|------------------|-------------------------------|------------------------|
|                  | RATE                          | ADDI-<br>TIONAL<br>FEE |
| XS 9=            |                               | OR X\$18=              |
| X43=             |                               | OR X86=                |
| +145=            |                               | OR +290=               |
| TOTAL ADDIT. FEE |                               | OR TOTAL ADDIT. FEE    |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | OTHER THAN<br>SMALL ENTITY |                        |
|--|---|-------|---|------------------|----------------------------|------------------------|
|  |   |       |   |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |
| Total  | * Minus                                   | Minus | **  | =                | XS 9=                      |                        |
| Independent                                    | * Minus                                   | Minus | ***   | =                | X43=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       | <input type="checkbox"/>                    | +145=            |                            |                        |

| RATE             | OTHER THAN<br>OR SMALL ENTITY |                        |
|------------------|-------------------------------|------------------------|
|                  | RATE                          | ADDI-<br>TIONAL<br>FEE |
| XS 9=            |                               | OR X\$18=              |
| X43=             |                               | OR X86=                |
| +145=            |                               | OR +290=               |
| TOTAL ADDIT. FEE |                               | OR TOTAL ADDIT. FEE    |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.